

STATE OF MAINE
EXAMINATION APPLICATION FOR
COMMERCIAL DRIVER'S LICENSE / SCHOOL BUS

Print Name Here	Last Name		First Name		Middle Name		MAILING ADDRESS	
Place of Residence								
Date of Birth		Color of Hair	Color of Eyes	Height	Weight	Sex	Telephone Number	Social Security Number
Mo.	Day	Yr.	(Not Compulsory)	Ft. In.	Lbs.	M or F		(Compulsory)

Station

CHECK BOX BELOW FOR CLASS AND/ OR ENDORSEMENTS DESIRED.
WRITTEN, VISION, SKILLS AND PRE-TRIP EQUIPMENT TESTS MAY BE REQUIRED.

- ☐ **CLASS A:** **\$35.00 FEE** ANY COMBINATION OF VEHICLES WITH A GROSS COMBINATION WEIGHT RATING OR REGISTERED WEIGHT OF 26,001 OR MORE POUNDS. PROVIDED THE GROSS VEHICLE WEIGHT RATING OR GROSS WEIGHT OF THE VEHICLE OR VEHICLES BEING TOWED IS IN EXCESS OF 10,000 POUNDS. A "CLASS A" LICENSE IS A COMMERCIAL DRIVER'S LICENSE. INCLUDES CLASSES "B" AND "C".
- ☐ **CLASS B:** **\$35.00 FEE** SINGLE UNIT VEHICLES OF 26,001 POUNDS OR MORE GROSS VEHICLE WEIGHT RATING OR REGISTERED WEIGHT. LICENSE HOLDERS IN THIS CLASS MAY TOW A VEHICLE NOT IN EXCESS OF 10,000 POUNDS GROSS VEHICLE WEIGHT RATING OR GROSS WEIGHT. INCLUDES CLASS "C"
- ☐ **CLASS C:** **\$10.00 FEE** ANY SINGLE VEHICLE OR COMBINATION OF VEHICLES THAT DOES NOT MEET THE DEFINITION OF CLASS "A" OR CLASS "B".

ENDORSEMENTS WRITTEN EXAMS ARE REQUIRED FOR ALL ENDORSEMENTS. PASSENGER AND SCHOOL BUS ENDORSEMENTS WILL ALSO REQUIRE A SKILLS TEST. "X" ENDORSEMENT IS A COMBINATION OF BOTH HAZARDOUS MATERIALS AND TANK ENDORSEMENTS, BOTH TESTS ARE REQUIRED. IF YOU HAVE A "CDL" LICENSE AND ARE TRANSFERRING TO A MAINE LICENSE YOU MUST CHECK THE ENDORSEMENTS THAT YOU HAVE ON YOUR CURRENT "CDL" TO TRANSFER THAT ENDORSEMENT TO THE MAINE "CDL". THE "H" ENDORSEMENT REQUIRES A WRITTEN EXAMINATION.

*** **\$10.00 FEE FOR EACH ENDORSEMENT CHECKED**

- ☐ **"H"** **HAZARDOUS MATERIALS:** SUPPLEMENTAL APPLICATION REQUIRED (MVE-64H)
- ☐ **"N"** **TANK VEHICLES:** REQUIRED ON ANY "CDL" WHEN TRANSPORTING LIQUID OR GASEOUS MATERIAL IN A TANK; OR ANY PORTABLE TANK HAVING A RATED CAPACITY OF 1000 GALLONS OR MORE.
- ☐ **"T"** **DOUBLE/TRIPLE TRAILERS:** REQUIRED FOR "CLASS A" OPERATORS WHO HAUL DOUBLE/TRIPLE TRAILERS, (WHERE OPERATION IS PERMITTED BY LAW).
- ☐ **"P"** **PASSENGER:** REQUIRED ON ANY CLASS LICENSE WHEN THE VEHICLE BEING OPERATED IS DESIGNED TO SEAT MORE THAN 15 PASSENGERS INCLUDING THE OPERATOR. CLASS B LICENSE IS REQUIRED WITH THIS ENDORSEMENT IF THE VEHICLE EXCEEDS 26,000 POUNDS GVWR. SCHOOL BUS IS NOT INCLUDED AS IT IS A SEPARATE SPECIAL ENDORSEMENT.

****SPECIAL NOTE**** THE "P" ENDORSEMENT IS INCLUDED AT NO FEE WHEN APPLYING FOR SCHOOL BUS ENDORSEMENT.***

- ☐ **SCHOOL BUS** **\$10.00 FEE** ALL APPLICANTS FOR SCHOOL BUS ENDORSEMENT MUST BE AT LEAST 21 YEARS OF AGE AND HAVE HELD A VALID LICENSE FOR AT LEAST ONE YEAR. IF THE SCHOOL BUS IS DESIGNED TO CARRY OVER 15 PASSENGERS INCLUDING THE DRIVER, AND THE GVWR IS 26,001 POUNDS OR MORE A CLASS "B" WITH "P" ENDORSEMENT IS REQUIRED. IF THE GVWR IS 26,000 POUNDS OR LESS, A CLASS "C" CDL WITH "P" ENDORSEMENT IS REQUIRED. IF THE SCHOOL BUS HAS A GVWR OF 26,000 POUNDS OR LESS AND IS DESIGNED TO SEAT 15 PASSENGERS OR LESS A "CDL" IS NOT REQUIRED AND CAN BE OPERATED ON A NON COMMERCIAL DRIVER'S LICENSE. UPON SUCCESSFUL QUALIFICATION THE APPROPRIATE LICENSE WILL BE ENDORSED: "Y" FOR OVER 15 PASSENGERS INCLUDING THE DRIVER; "Z" FOR 15 PASSENGERS OR LESS INCLUDING THE DRIVER.

**** A SCHOOL BUS DRIVERS MEDICAL EVALUATION REPORT MUST ACCOMPANY THIS APPLICATION WHEN APPLYING FOR A SCHOOL BUS ENDORSEMENT. ****

****APPLICATION EXAMINATION FEES MUST ACCOMPANY THIS APPLICATION ****

THE ABOVE CLASSES/ ENDORSEMENTS DO NOT INCLUDE THE OPERATION OF MOTORCYCLES. MOTOR-DRIVEN CYCLES.
A SEPARATE APPLICATION MUST BE COMPLETED IF YOU ARE APPLYING FOR A MOTORCYCLE, MOTOR-DRIVEN CYCLE ENDORSEMENT.

PLEASE ANSWER THE FOLLOWING QUESTIONS COMPLETELY

- | | YES | NO |
|---|--------------------------|--------------------------|
| 1) DO YOU CLAIM MAINE AS YOUR STATE OF DOMICILE (PERMANENT AND PHYSICAL RESIDENCE)? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2) PLACE OF BIRTH _____ | | |
| CITY OR TOWN | STATE OR COUNTRY | |
| 3) ARE YOU APPLYING FOR AN INSTRUCTION PERMIT? | <input type="checkbox"/> | <input type="checkbox"/> |

PLEASE ANSWER THE FOLLOWING QUESTIONS COMPLETELY

- | | YES | NO |
|---|--------------------------|--------------------------|
| 4) HAVE YOU COMPLETED A COURSE IN DRIVER EDUCATION ? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5) DO YOU NOW HOLD A VALID DRIVER'S LICENSE FROM SOME OTHER STATE, COUNTRY, OR PROVINCE ? | <input type="checkbox"/> | <input type="checkbox"/> |
| IF YES, WHAT CLASS ? _____ EXPIRATION DATE ? _____ WHERE ? _____ | | |
| IS IT A COMMERCIAL DRIVER'S LICENSE (CDL)? CLASS ? _____ ENDORSEMENTS ? _____ | | |
| DO YOU HAVE A MOTORCYCLE ENDORSEMENT? IF YES, YOU MUST ALSO COMPLETE A MOTORCYCLE APPLICATION. | | |
| 6) DO YOU NOW HOLD OR HAVE YOU HELD A MAINE DRIVER'S LICENSE ? IN WHAT NAME? _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| CLASS? _____ EXPIRATION DATE ? _____ ENDORSEMENTS ? _____ | | |
| 7) HAVE YOU BEEN CONVICTED OF VIOLATING ANY MOTOR VEHICLE LAWS IN ANY STATE OR PROVINCE WITHIN THE LAST 10 YEARS? | <input type="checkbox"/> | <input type="checkbox"/> |
| IF YES, WHAT WAS THE VIOLATION? _____ DATE? _____ WHERE? _____ | | |
| 8) IS YOUR PRIVILEGE TO OPERATE A MOTOR VEHICLE UNDER SUSPENSION OR REVOCATION IN THIS STATE OR ANY OTHER STATE OR PROVINCE? | <input type="checkbox"/> | <input type="checkbox"/> |
| 9) ARE YOU NOW DISQUALIFIED TO OPERATE A COMMERCIAL VEHICLE BY FEDERAL D.O.T. REGULATIONS? | <input type="checkbox"/> | <input type="checkbox"/> |
| 10) DO YOU HAVE ANY OF THE FOLLOWING MEDICAL CONDITIONS? YES <input type="checkbox"/> NO <input type="checkbox"/> | | |
| IF YES, PLEASE CHECK WHICH CONDITION BELOW. | | |
| EPILEPSY/SEIZURES <input type="checkbox"/> DIABETES <input type="checkbox"/> HEART TROUBLE <input type="checkbox"/> BLACKOUTS/ LOSS OF CONSCIOUSNESS <input type="checkbox"/> | | |
| LIMB AMPUTATION <input type="checkbox"/> PARALYSIS <input type="checkbox"/> STROKE/ SHOCK <input type="checkbox"/> PARKINSON'S DISEASE <input type="checkbox"/> | | |
| MENTAL / EMOTIONAL <input type="checkbox"/> OTHER CONDITION, PLEASE EXPLAIN BELOW. <input type="checkbox"/> | | |

PLEASE NOTE: IF YOU HAVE BEEN SUBJECT TO ANY OF THE ABOVE PHYSICAL CONDITIONS, IT MAY BE NECESSARY FOR YOU TO PROVIDE ADDITIONAL INFORMATION IN ORDER TO PROPERLY PROCESS YOUR APPLICATION

- | | YES | NO |
|---|--------------------------|--------------------------|
| 11) I CERTIFY THAT I MEET QUALIFICATION REQUIREMENTS CONTAINED IN SECTION 391 OF THE FEDERAL MOTOR CARRIER SAFETY REGULATIONS | <input type="checkbox"/> | <input type="checkbox"/> |
| 12) I CERTIFY THAT I OPERATE AND EXPECT TO OPERATE ENTIRELY INTRASTATE COMMERCE AND THEREFORE WOULD NOT BE SUBJECT TO SECTION 391 OF THE FEDERAL MOTOR CARRIER SAFETY REGULATIONS | <input type="checkbox"/> | <input type="checkbox"/> |
| 13) I CERTIFY THAT THE MOTOR VEHICLE IN WHICH I WILL TAKE MY DRIVING SKILLS TEST IS REPRESENTATIVE OF THE TYPE OF MOTOR VEHICLE THAT I EXPECT TO OPERATE | <input type="checkbox"/> | <input type="checkbox"/> |
| 14) NAME <u>ALL</u> STATES WHERE YOU HAVE PREVIOUSLY BEEN LICENSED FOR THE PAST TEN (10) YEARS TO DRIVE ANY TYPE OF MOTOR VEHICLE _____ | | |

I AM REQUESTING AN ORAL EXAM YES ☐ NO ☐

PLEASE SEND ME A MANUAL TO STUDY YES ☐ NO ☐

I AM AWARE THAT ANY MISSTATEMENT ON THIS APPLICATION WILL RESULT IN IMMEDIATE ANNULMENT OF MY PERMIT OR LICENSE AND MY PRIVILEGE TO OPERATE IN THE STATE OF MAINE MAY BE SUSPENDED FOR A PERIOD TO BE DETERMINED BY THE SECRETARY OF STATE. FURTHERMORE, I UNDERSTAND THAT COURT ACTION MAY BE TAKEN AGAINST ME FOR ANY MISSTATEMENT OF FACT.

SIGNATURE OF APPLICANT

DATE

THE SECRETARY OF STATE SHALL NOT ACCEPT THIS APPLICATION FOR ANY MINOR UNDER THE AGE OF 18 YEARS UNLESS THE APPLICATION IS SIGNED BY A PARENT OR LEGAL GUARDIAN HAVING CUSTODY OF THE MINOR OR BY THE SPOUSE OF THE MINOR PROVIDED THE SPOUSE OF THE MINOR IS 18 YEARS OF AGE OR OLDER. ANY PERSON WHO HAS SIGNED THE APPLICATION FOR A MINOR FOR AN OPERATORS LICENSE OR INSTRUCTION PERMIT MAY THEREAFTER FILE WITH THE DEPARTMENT, A NOTARIZED WRITTEN REQUEST THAT THE LICENSE OR INSTRUCTION PERMIT OF SAID MINOR, SO GRANTED, BE SUSPENDED.

SIGNATURE OF PARENT OR AS REQUIRED ABOVE.

RELATIONSHIP TO APPLICANT

TWO FORMS OF IDENTIFICATION REQUIRED. APPLICANTS 15 YEARS OF AGE MAY HOLD AN INSTRUCTION PERMIT, BUT MAY NOT APPLY FOR ROAD TEST AND BE ISSUED A LICENSE UNTIL ATTAINING THEIR 16TH BIRTHDAY. ALL APPLICANTS UNDER 18 YEARS OF AGE MUST FILE A DRIVER'S EDUCATION COMPLETION CERTIFICATE. A BIRTH CERTIFICATE IS REQUIRED FOR APPLICANTS UNDER AGE 23. ANY PHOTOCOPY OF THE BIRTH CERTIFICATE MUST HAVE AN EMBOSSED SEAL OR STAMP OF THE ISSUING AGENCY. NOTARIZED COPIES ARE **NOT** ACCEPTABLE. ALL QUESTIONS ON THIS APPLICATION MUST BE ANSWERED AND ACCOMPANIED BY THE REQUIRED MATERIAL OR THE APPLICATION WILL BE RETURNED, CAUSING UNDUE DELAY IN BEING SCHEDULED FOR AN EXAMINATION.

****APPLICATION FEE MUST ACCOMPANY THIS APPLICATION **PLEASE SEND REQUIRED MATERIAL AND FEE (CHECK OR MONEY ORDER) TO: SECRETARY OF STATE, BUREAU OF MOTOR VEHICLES, CDL SECTION, STATE HOUSE STATION # 29, AUGUSTA, MAINE 04333**

THE ROAD TEST PHASE OF THE EXAMINATION FOR A LICENSE MAY BE WAIVED FOR THE HOLDERS OF A VALID OUT OF STATE LICENSE